

09/582705

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	37-12-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ Rejected  
 - Allowed  
 - (Through number) Canceled  
 - Restricted

H Non-closed  
 I Interference  
 A Appeal  
 O Objected

Claim	Date
1	1/3/01
2	1/7/01
3	0/0/01
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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48	✓
49	✓
50	✓

Claim	Date
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Claim	Date
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1ST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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